

Fill in this information to identify the caseDebtor name Tall City Well Service, LPUnited States Bankruptcy Court for the: WESTERN DISTRICT OF TEXASCase number
(if known) 16-70079☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets -- Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of
debtor's interest**2. Cash on hand****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of
account number**3.1. Checking account**Wells FargoChecking account\$11,461.00**3.2. Checking account**Platinum BankChecking account\$2,752.00**3.3. Checking account**Wells FargoChecking account\$10,000.00**3.4. Checking account**Wells FargoChecking account\$16,000.00

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****4. Other cash equivalents** (Identify all)

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$40,213.00**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Current value of
debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Security Deposit**City of Odessa, Texas****\$200.00****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$200.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes. Fill in the information below.

Current value of
debtor's interest**11. Accounts receivable**

11a. 90 days old or less: **\$8,010,518.00** — **\$0.00** = → **\$8,010,518.00**
face amount doubtful or uncollectible accounts

11b. Over 90 days old: **\$0.00** — **\$0.00** = → **\$0.00**
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$8,010,518.00**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the information below.

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Debtor **Tall City Well Service, LP**
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	Valuation method used for current value	Current value of debtor's interest
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14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$0.00**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			

Debtor **Tall City Well Service, LP**
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29. Farm animals *Examples:* Livestock, poultry, farm-raised fish
30. Farm machinery and equipment (Other than titled motor vehicles)
31. Farm and fishing supplies, chemicals, and feed
32. Other farming and fishing-related property not already listed in Part 6

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$0.00

34. Is the debtor a member of an agricultural cooperative?

- ☒ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value _____ Valuation method _____ Current value _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Office furniture See Exhibit	\$15,000.00	Liquidation	\$15,000.00
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$15,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. Vehicles			
See Exhibit	\$4,153,800.00	Liquidation	\$4,153,800.00
47.2. Trailers			
See Exhibit	\$68,000.00	Liquidation	\$68,000.00
48. Watercraft, trailers, motors, and related accessories Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1. Mobile homes for employees			
See Exhibit	\$87,000.00	Liquidation	\$87,000.00

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

Shop Equipment			
See Exhibit	\$25,000.00	Liquidation	\$25,000.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$4,333,800.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
- ☐ Yes. Fill in the information below.

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and Intellectual Property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00**67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

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Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079**Current value of
debtor's interest**71. Notes receivable**

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities**74. Causes of action against third parties (whether or not a lawsuit has been filed)****75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims****76. Trusts, equitable or future interests in property****77. Other property of any kind not already listed** *Examples: Season tickets, country club membership***Fuel and parts inventory****See Exhibit****\$47,000.00****78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$47,000.00**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$40,213.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$200.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$8,010,518.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$15,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$4,333,800.00</u>	
88. Real property. <i>Copy line 56, Part 9.</i> →		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$47,000.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$12,446,731.00</u>	91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$12,446,731.00</u>

Fill in this information to identify the case:Debtor name Tall City Well Service, LPUnited States Bankruptcy Court for the: WESTERN DISTRICT OF TEXASCase number
(if known) 16-70079☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

*Column A*Amount of claim
Do not deduct the
value of collateral.*Column B*Value of collateral
that supports
this claim

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$12,428,779.00

Debtor Tall City Well Service, LPCase number (if known) 16-70079**Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports
this claim**2.1**

Creditor's name

Wells Fargo BankDescribe debtor's property that is
subject to a lien\$5,021,653.00\$12,428,779.00

Creditor's mailing address

c/o John P. Kincade**Equipment**500 Winstead Building

Describe the lien

2728 N. Harwood Street**Business Loan / Agreement**Dallas TX 75201

Is the creditor an insider or related party?

☒ No☐ Yes

Creditor's email address, if known

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)Date debt was incurred VariousLast 4 digits of account
number

As of the petition filing date, the claim is:

Check all that apply.

Do multiple creditors have an interest in
the same property?☐ No☒ Yes. Specify each creditor, including this
creditor, and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**For Checking account Wells Fargo:****1) Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For****Checking account Wells Fargo: 1)****Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For****Checking account Wells Fargo: 1)****Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For****Vehicles See Exhibit: 1) Wells Fargo
Bank; 2) Wells Fargo Equipment****Finance, Inc.. For Shop Equipment
See Exhibit: 1) Wells Fargo Bank; 2)****Wells Fargo Equipment Finance,
Inc.. For Trailers See Exhibit: 1)****Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For Mobile****homes for employees See Exhibit:****1) Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For Fuel****and parts inventory See Exhibit: 1)****Wells Fargo Bank; 2) Wells Fargo
Equipment Finance, Inc.. For****Accounts Receivable: 1) Wells
Fargo Bank; 2) Wells Fargo****Equipment Finance, Inc..**

Debtor Tall City Well Service, LPCase number (if known) 16-70079**Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports
this claim**2.2**

Creditor's name

Wells Fargo Equipment Finance, Inc.Describe debtor's property that is
subject to a lien\$7,407,126.00\$12,428,779.00

Creditor's mailing address

c/o John P. Kincade**Equipment**500 Winstead Bldg

Describe the lien

2728 N. Harwood St.**Business Loan / Agreement**Dallas TX 75201

Is the creditor an insider or related party?

☒ No☐ Yes

Creditor's email address, if known

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)Date debt was incurred VariousLast 4 digits of account
number

As of the petition filing date, the claim is:

Check all that apply.

Do multiple creditors have an interest in
the same property?☐ No☒ Yes. Have you already specified the
relative priority?☐ Contingent☐ Unliquidated☐ Disputed☐ No. Specify each creditor, including this
creditor, and its relative priority.☒ Yes. The relative priority of creditors is
specified on lines 2.1

Fill in this information to identify the case:

Debtor Tall City Well Service, LP

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number (if known) 16-70079

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part. If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address IRS 300 E 8th Street M/S 5026 AUS Austin TX 78701 Date or dates debt was incurred Various Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	 <u>\$653,764.64</u> <u>\$653,764.64</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.1</div> Nonpriority creditor's name and mailing address 3B Ranch Water Station P.O. Box 833 Kermit TX 79745 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,685.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.2</div> Nonpriority creditor's name and mailing address 3TG, LLC Water Station 1 Diana Lane San Angelo TX 76904 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,824.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.3</div> Nonpriority creditor's name and mailing address 5-H Water Station 22501 S. Hwy 349 Midkiff TX 79755 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$165.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.4</div> Nonpriority creditor's name and mailing address 7 SWD, LLC P.O. Box 669 Winters TX 79567 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$195.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.5</div> Nonpriority creditor's name and mailing address A + Auto Glass 852 W. Sundown Odessa TX 79766 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$533.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.6</div> Nonpriority creditor's name and mailing address A - 1 Sign Engravers, Inc. P.O. Box 2641 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$233.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.7</div> Nonpriority creditor's name and mailing address AIM Media Texas Operating, LLC Odessa American P.O. Box 3959 McAllen TX 78502 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$728.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.8</div> Nonpriority creditor's name and mailing address Aire Serv Heating & AC P.O. Box 4591 Midland TX 79704 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,319.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <u>Airgas USA, LLC</u> <u>P.O. Box 676015</u> <u>Dallas TX 75267-6015</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,471.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <u>Airgas USA, LLC</u> <u>P.O. Box 676015</u> <u>Dallas TX 75267-6015</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,826.06</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <u>Alcan Auto Parts, Inc.</u> <u>1040 N. Grandview</u> <u>Odessa TX 79761-3149</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$176.18</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <u>American Water Sales</u> <u>P.O. Box 4636</u> <u>3559 N FM 1212</u> <u>Tarzan TX 79783</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$204.00</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.13</div> Nonpriority creditor's name and mailing address Anchor Bolt and Supply Company 722 W. 2nd P.O. Box 908 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,199.62
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.14</div> Nonpriority creditor's name and mailing address Aqua Terra Water Management 14090 Southwest Fwy #300 Sugar Land TX 77478 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,400.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.15</div> Nonpriority creditor's name and mailing address AT&T P.O. Box 5014 Carol Stream IL 60197-5019 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,777.88
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.16</div> Nonpriority creditor's name and mailing address Austin Distributing P.O. Box 7890 Amarillo TX 79114-7890 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,922.66

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.17</div> Nonpriority creditor's name and mailing address B-Line Filter & Supply, Inc. P.O. Box 4598 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,919.66
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.18</div> Nonpriority creditor's name and mailing address B-Line Lube & Filter P.O. Box 4617 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,440.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.19</div> Nonpriority creditor's name and mailing address Big Toe Wreckers 2922 S.County Rd. West Odessa TX 79766 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$830.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div> Nonpriority creditor's name and mailing address Blue Duck SWD, LLC 10455 North Central Expressway Ste. 109 #376 Dallas TX 75231 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,701.50

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.21</div> Nonpriority creditor's name and mailing address Blue Ribbon Technology P.O. Box 4346 Department 60 Houston TX 77210 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,677.29
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.22</div> Nonpriority creditor's name and mailing address BMD Martin, LLC 500 Main St., Ste.900 Fort Worth TX 76102 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$132.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.23</div> Nonpriority creditor's name and mailing address BMD Reagan, LLC 500 Main Street, Ste. 900 Fort Worth TX 76102 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,921.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.24</div> Nonpriority creditor's name and mailing address BMD West Glasscock, LLC 500 Main Street, Ste 900 Fort Worth TX 76102 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,579.50

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Amount of claim

3.25 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

*Check all that apply.***\$948.25****Boler Equipment Svc., Inc.**☐ Contingent**P.O. Box 80426**☐ Unliquidated☐ Disputed

Basis for the claim:

Midland TX 79708**Goods and/or Services**Date or dates debt was incurred **Various**

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.26** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

*Check all that apply.***\$505.02****Brakes & Wheels, Inc.**☐ Contingent**3245 Kermit Hwy**☐ Unliquidated☐ Disputed

Basis for the claim:

Odessa TX 79764-6492**Goods and/or Services**Date or dates debt was incurred **Various**

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.27** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

*Check all that apply.***\$883.94****Bruckner's Truck Sales, Inc.**☐ Contingent**Dept 959**☐ Unliquidated**P.O. Box 1000**☐ Disputed

Basis for the claim:

Memphis TN 38148**Goods and/or Services**Date or dates debt was incurred **Various**

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.28** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

*Check all that apply.***\$100.00****Bryant Ranch**☐ Contingent**110 N. Marienfield**☐ Unliquidated**Ste. 200**☐ Disputed

Basis for the claim:

Midland TX 79701**Goods and/or Services**Date or dates debt was incurred **Various**

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.29</div> Nonpriority creditor's name and mailing address BTA Oil Producers 104 S. Pecos Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.30</div> Nonpriority creditor's name and mailing address Buckhorn Energy Svc 5613 DTC Parkway Ste. 800 Greenwood Village CO 80111 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.31</div> Nonpriority creditor's name and mailing address C & H Water Company, LLC 1108 W. Co. Rd. 130 Midland TX 79706 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.32</div> Nonpriority creditor's name and mailing address C & N Trucking, LLC P.O. Box 1218 Kermit TX 79745 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address Chance Properties Co. P.O. Box 1221 Kermit TX 79745 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,599.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address Continental Battery Company 4919 Woodall Street Dallas TX 75247 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,915.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address Cook Water Station P.O. Box 131 Stanton TX 79782-0131 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> Nonpriority creditor's name and mailing address Corey Sly Electrical Svc., Inc. 1406 Cotton Flat Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89,480.49

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.37</div> Nonpriority creditor's name and mailing address Cougar Cleaning Equipment P.O. Box 13985 Odessa TX 79768-3985 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.38</div> Nonpriority creditor's name and mailing address Crazy Horse SWD, LLD P.O. Box 1479 Carlsbad NM 88221 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,786.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.39</div> Nonpriority creditor's name and mailing address CRS Diagnostic Services, LLC P.O. Box 216 Andrews TX 79714 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,370.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.40</div> Nonpriority creditor's name and mailing address Cuervo, Inc. P.O. Box 1208 Fort Stockton TX 79735 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,912.50

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.41</div> Nonpriority creditor's name and mailing address CWO, Inc. P.O. Box 1877 Monahans TX 79756 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.42</div> Nonpriority creditor's name and mailing address D & B Fresh Water Station David Weishuhn 2255 CR 150 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,105.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.43</div> Nonpriority creditor's name and mailing address Dandy Specialties, Inc. Dept. 207 P.O. Box 4346 Houston TX 77210-4346 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$916.37
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.44</div> Nonpriority creditor's name and mailing address Dell Business Credit Payment Processing Center P.O. Box 5257 Carol Stream IL 60197-5257 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,555.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.45</div> Nonpriority creditor's name and mailing address <u>Diamond Fleet Parts, Inc.</u> <u>1925 W 2nd</u> <u>Odessa</u> TX <u>79763</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,869.19</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.46</div> Nonpriority creditor's name and mailing address <u>Eagle Rubber and Supply</u> <u>P.O. Box 1253</u> <u>Levelland</u> TX <u>79336</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,176.12</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.47</div> Nonpriority creditor's name and mailing address <u>Eagle Storage</u> <u>7682 Falcon Ln</u> <u>San Angelo</u> TX <u>76901</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$401.28</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.48</div> Nonpriority creditor's name and mailing address <u>Earhart Fresh Water</u> <u>2450 Hwy 137</u> <u>Stanton</u> TX <u>79782</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$48.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.49</div> Nonpriority creditor's name and mailing address EDDR Joint Venture AKA Hwy 158 Water Station P.O. Box 10019 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.50</div> Nonpriority creditor's name and mailing address Enertek Efficiency Svc., LLC 11805 Interstate 27 Amarillo TX 79119 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,725.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.51</div> Nonpriority creditor's name and mailing address Falcon Technologies & Svc, Inc. P.O. Box 202901 Dallas TX 75320-2901 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,849.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.52</div> Nonpriority creditor's name and mailing address Five G Leasing, Inc. 3051 County Rd. 130 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$796.50

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.53</div> Nonpriority creditor's name and mailing address Fleetpride P.O. Box 847118 Dallas TX 75284-7118 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,958.54
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.54</div> Nonpriority creditor's name and mailing address Fluid Energy Svc., LLC P.O. Box 366 Crane TX 79731 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$913.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.55</div> Nonpriority creditor's name and mailing address Forrest Tire Co., Inc.-Odessa P.O. Box 1778 Carlsbad NM 88221-1778 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,264.96
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.56</div> Nonpriority creditor's name and mailing address Frig-n Water Station 1100 N. Main Ave. Big Lake TX 76932 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$203.50

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.57</div> Nonpriority creditor's name and mailing address Frio Water Holdings, LLC 6413 N. Hwy 349, Bldg F Midland TX 79705 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.58</div> Nonpriority creditor's name and mailing address Fuel Mark P.O. Box 69192 Odessa TX 79769 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,802.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.59</div> Nonpriority creditor's name and mailing address G & K Services, Inc. P.O. Box 842385 Boston MA 02284 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,136.23
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.60</div> Nonpriority creditor's name and mailing address G & M Water Station #1 P.O. Box 222 Midkiff TX 79755 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$390.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.61</div> Nonpriority creditor's name and mailing address Garden City Water Station James Cypert P.O. Box 63 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,970.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.62</div> Nonpriority creditor's name and mailing address Gary Halfmann Farms, Inc. 2200 CR 105 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.63</div> Nonpriority creditor's name and mailing address Geoforce, Inc. Dept. 3241 P.O. Box 123241 Dallas TX 75312-3241 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,019.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.64</div> Nonpriority creditor's name and mailing address GJ&K Freshwater Station 1851 County Road 130 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.65</div> Nonpriority creditor's name and mailing address Glamorous Window Coverings P.O. Box 2703 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,635.65
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.66</div> Nonpriority creditor's name and mailing address GNJ Water, Inc. P.O. Box 414 Pyote TX 79777 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.67</div> Nonpriority creditor's name and mailing address Grace Operating, Inc. P.O. Box 66 Andrews TX 79714 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,764.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.68</div> Nonpriority creditor's name and mailing address Graham Water Station Roy H. Graham 12609 FM 307 Midland TX 79706 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,140.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.69</div> Nonpriority creditor's name and mailing address <u>H2Oil Recovery Svc.</u> <u>P.O. Box 4906</u> <u>Houston TX 77210</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,375.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.70</div> Nonpriority creditor's name and mailing address <u>Haley Brine Company</u> <u>P.O. Box 779</u> <u>10215 State Hwy 302 West</u> <u>Kermit TX 79745</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,419.51</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.71</div> Nonpriority creditor's name and mailing address <u>Hatfield & Co., Inc.</u> <u>P.O. Box 910862</u> <u>Dallas TX 75391-0862</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$681.72</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.72</div> Nonpriority creditor's name and mailing address <u>Health Care Service Corporation</u> <u>P.O. Box 731428</u> <u>Dallas TX 75373-1428</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.73</div> Nonpriority creditor's name and mailing address Henderson & Erickson, Inc. 410 N. Main Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,173.25
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.74</div> Nonpriority creditor's name and mailing address Hill's Kwik Printing 2514 N. Grandview Odessa TX 79761 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$626.33
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.75</div> Nonpriority creditor's name and mailing address Hwy 137 Fresh Water Station ATTN: Bradley Batia 2106 Whitney Dr. Midland TX 79705 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.76</div> Nonpriority creditor's name and mailing address Interstate Batteries of W.T. P.O. Box 60264 Midland TX 79711 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,388.46

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.77</div> Nonpriority creditor's name and mailing address <u>Interstate Billing Svc., Inc.</u> <u>P.O. Box 2208</u> <u>Decatur</u> <u>AL</u> <u>35609</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$431.92</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.78</div> Nonpriority creditor's name and mailing address <u>J & M Cattle Co.</u> <u>P.O. Box 163</u> <u>Mentone</u> <u>TX</u> <u>79754</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,375.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.79</div> Nonpriority creditor's name and mailing address <u>J J Keller & Assoc, Inc.</u> <u>P.O. Box 6609</u> <u>Carol Stream</u> <u>IL</u> <u>60197-6609</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,085.36</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.80</div> Nonpriority creditor's name and mailing address <u>John's Sales & Svc., Inc</u> <u>P.O. Box 14371</u> <u>Odessa</u> <u>TX</u> <u>79768</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$527.32</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.81</div> Nonpriority creditor's name and mailing address Jost Fresh Water Station Lawrence & Helen Jost 1050 CR 130 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.82</div> Nonpriority creditor's name and mailing address K & E Cook Water Station P.O. Box 914 Stanton TX 79782 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$266.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.83</div> Nonpriority creditor's name and mailing address Kenneth Kase Conte 4143 Midrose Trail Dallas TX 75287 Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.84</div> Nonpriority creditor's name and mailing address KS Supplies, Inc. 2100 W 37th St. Odessa TX 79764 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,668.95

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.85</div> Nonpriority creditor's name and mailing address <u>Leather Neck Svc.</u> <u>P.O. Box 1177</u> <u>Crane</u> TX <u>79731-1143</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,586.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.86</div> Nonpriority creditor's name and mailing address <u>Leek Fire & Safety Co., Inc.</u> <u>P.O. Box 1563</u> <u>Odessa</u> TX <u>79760</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,286.43</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.87</div> Nonpriority creditor's name and mailing address <u>Lily's Water Station</u> <u>3110 East County Road 144</u> <u>Midland</u> TX <u>79706</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,404.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div> Nonpriority creditor's name and mailing address <u>Loaded Dice Safety</u> <u>P.O. Box 13627</u> <u>Odessa</u> TX <u>79768</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,262.97</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.89</div> Nonpriority creditor's name and mailing address Lone Star Gasket & Supply, Inc. 1416 N. Grant P.O. Box 2615 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20.82
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.90</div> Nonpriority creditor's name and mailing address Mantek P.O. Box 971269 Dallas TX 75397-1269 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,014.02
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.91</div> Nonpriority creditor's name and mailing address Mark's Water Well Svc Drilling, Inc. P.O. Box 295 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$170.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.92</div> Nonpriority creditor's name and mailing address Martin's Disposal LLC 4961 Cypress Ave. Odessa TX 79764 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$277.99

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.93</div> Nonpriority creditor's name and mailing address Maverick Sherrod SWD No. 1, LLC P.O. Box 1071 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,132.95
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.94</div> Nonpriority creditor's name and mailing address McWhorter's Ltd P.O. Box 2974 Lubbock TX 79408 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,620.70
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.95</div> Nonpriority creditor's name and mailing address Meliton Rodriguez 7944 S. Hwy 385 Odessa TX 79766 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,238.56
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.96</div> Nonpriority creditor's name and mailing address Melon Patch Water Station P.O. Box 126 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209.15

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.97</div> Nonpriority creditor's name and mailing address Mendford Trucking P.O. Box 87 Wink TX 79789 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$306.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.98</div> Nonpriority creditor's name and mailing address MHC Kenworth - Odessa P.O. Box 879269 Kansas City MO 64187-9269 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	(\$21.39)
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.99</div> Nonpriority creditor's name and mailing address Michael V. Shelton MD PA P.O. Box 14704 Belfast, ME 049154042 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$976.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.100</div> Nonpriority creditor's name and mailing address Midessa Telephone Systems, Inc. P.O. Box 60688 2800 Laforce Blvd. Midland TX 79711 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,137.94

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.101</div> Nonpriority creditor's name and mailing address <u>Midland County Appraisal District</u> <u>c/o Laura J. Monroe</u> <u>P.O. Box 817</u> <u>Lubbock</u> <u>TX</u> <u>79408</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,065.96</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.102</div> Nonpriority creditor's name and mailing address <u>Miguel Iniguez</u> <u>120 W. Adobe St.</u> <u>Odessa</u> <u>TX</u> <u>79766</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$600.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.103</div> Nonpriority creditor's name and mailing address <u>Mitchell's Water Svc</u> <u>P.O. Box 764</u> <u>Kermit</u> <u>TX</u> <u>79745</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$165.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.104</div> Nonpriority creditor's name and mailing address <u>Mrs. Lawson Water Station</u> <u>504 Dove Hollow Trail</u> <u>Georgetown</u> <u>TX</u> <u>78633</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$32.00</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.105</div> Nonpriority creditor's name and mailing address <u>MTN Cotton Gin SWD, LLC</u> <u>823 West Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$72.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.106</div> Nonpriority creditor's name and mailing address <u>MTN Crenshaw SWD</u> <u>23 W Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$35.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.107</div> Nonpriority creditor's name and mailing address <u>MTN Energy Corp</u> <u>23 W Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,794.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.108</div> Nonpriority creditor's name and mailing address <u>MTN Holley SWD, LLC</u> <u>23 West Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$300.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.109</div> Nonpriority creditor's name and mailing address <u>MTN Horace Tubb SWD, LLC</u> <u>23 West Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$120.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.110</div> Nonpriority creditor's name and mailing address <u>MTN Hwy 1450 SWD, LLC</u> <u>23 W Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,220.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.111</div> Nonpriority creditor's name and mailing address <u>MTN Mabree II SWD</u> <u>23 W. Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$280.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.112</div> Nonpriority creditor's name and mailing address <u>MTN Rayburn SWD</u> <u>23 W Industrial Loop</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,388.00</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.113</div> Nonpriority creditor's name and mailing address MTN-Horace SWD, LLC 23 W Industrial Loop Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.114</div> Nonpriority creditor's name and mailing address Nabors Completion & Production Svc Co P.O. Box 975682 Dallas TX 75397-5682 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,173.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.115</div> Nonpriority creditor's name and mailing address NGL Energy Partners, LP 6120 South Yale Avenue Ste 1000 Tulsa OK 74136 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,390.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.116</div> Nonpriority creditor's name and mailing address NGL Water Solutions Permian, LLC ATTN: Treasury 3773 Cherry Creek N Dr., Ste 1000 Denver CO 80209 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196,232.00

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.117</div> Nonpriority creditor's name and mailing address O Rourke Petroleum P.O. Box 301150 Dallas TX 75303-1150 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,241.68
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.118</div> Nonpriority creditor's name and mailing address Odessa Physical Therapy 4407 N. Grandview Odessa TX 79762 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,705.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.119</div> Nonpriority creditor's name and mailing address Odessa Pumps & Equipment 3209 N County Rd West Odessa TX 79764 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.98
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.120</div> Nonpriority creditor's name and mailing address Odessa Regional Hospital P.O. Box 4859 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$794.44

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.121</div> Nonpriority creditor's name and mailing address <u>Odessa Spring Brake & Axle, Inc.</u> <u>915 E 2nd</u> <u>P.O. Box 512</u> <u>Odessa</u> TX <u>79760-0512</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,958.75</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.122</div> Nonpriority creditor's name and mailing address <u>OWLSWD Operating, LLC</u> <u>8214 Westchester Dr.</u> <u>Ste. 850</u> <u>Dallas</u> TX <u>75225</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,752.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.123</div> Nonpriority creditor's name and mailing address <u>PA Prospect</u> <u>c/o Crazy MTN, Inc.</u> <u>P.O. Box 577</u> <u>Laurel</u> MT <u>59044</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,725.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.124</div> Nonpriority creditor's name and mailing address <u>Parsley Energy Operations, LLC</u> <u>P.O. Box 11090</u> <u>Midland</u> TX <u>79702</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,423.00</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.125 Nonpriority creditor's name and mailing address Permian Basin Payroll Svc, Inc. 3000 North Garfield, Ste 265 Midland TX 79705-6496 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,307.88
3.126 Nonpriority creditor's name and mailing address Permian Machinery Movers P.O. Box 11281 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$241.82
3.127 Nonpriority creditor's name and mailing address Permian Premier Health Svc P.O. Box 277719 Atlanta GA 30364-7719 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.128 Nonpriority creditor's name and mailing address Permian Regional Medical Center P.O. Box 2108 Andrews TX 79714 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,151.27

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.129 Nonpriority creditor's name and mailing address Petroplex SWD Systems, LLC P.O. Box 1873 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,733.50
3.130 Nonpriority creditor's name and mailing address Pit Dog, LLC 2432 E FM 1212 Stanton TX 79782 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92.00
3.131 Nonpriority creditor's name and mailing address Poco Crudo Svc, LLC P.O. Box 11404 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$144.00
3.132 Nonpriority creditor's name and mailing address Ponderosa Water Station P.O. Box 694 Monahans TX 79756 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.133</div> Nonpriority creditor's name and mailing address Premier Truck Group of Odessa P.O. Box 203796 Dallas TX 75320-3796 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,127.92
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.134</div> Nonpriority creditor's name and mailing address Pro-Select SWD 2, LLC P.O. Box 7307 Midland TX 79708 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.135</div> Nonpriority creditor's name and mailing address Pyote Disposal Co P.O. Box 418 Pyote TX 79777-0418 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,570.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.136</div> Nonpriority creditor's name and mailing address Pyote Water Systems II, LLC 400 W Illinois Ste 950 Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,106.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.137</div> Nonpriority creditor's name and mailing address <u>Pyote Water Systems IV, LLC</u> <u>400 W. Illinois Ste 950</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$85,964.45</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.138</div> Nonpriority creditor's name and mailing address <u>Pyote Water Systems, III, LLC</u> <u>400 W. Illinois</u> <u>Ste. 950</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$824.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.139</div> Nonpriority creditor's name and mailing address <u>Pyote Water Systems, LLC</u> <u>400 W Illinois</u> <u>Ste 900</u> <u>Midland TX 79701</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$78.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.140</div> Nonpriority creditor's name and mailing address <u>Quill Corporatin</u> <u>P.O. Box 37600</u> <u>Philadelphia PA 19101-0600</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$989.39</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.141</div> Nonpriority creditor's name and mailing address RBJ & Associates, LLC P.O. Box 50475 Midland TX 79710 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$233,520.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.142</div> Nonpriority creditor's name and mailing address Redneck Water Pit, LLC 5207 w fm 818 BIG SPRING TX 79720 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,479.55
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.143</div> Nonpriority creditor's name and mailing address Redtech Support 923 N Baird St Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,479.55
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.144</div> Nonpriority creditor's name and mailing address Republic Svc, Inc. P.O. Box 840730 Dallas TX 75284-0730 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,150.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.145 Nonpriority creditor's name and mailing address Rimrock Production, Inc. 3598 FM 448 Giddings TX 78942 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
3.146 Nonpriority creditor's name and mailing address Robert Walsh, Inc. P.O. Box 717 Forsan TX 79733 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.50
3.147 Nonpriority creditor's name and mailing address Rogers Construction P.O. Box 234 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$57.50
3.148 Nonpriority creditor's name and mailing address Rogers Lowe Properties, LLC 2104 Ironwood Midland TX 79707 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,362.50

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.149 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$17,320.00*Check all that apply.***Rush-Overland Manufacturing****P.O. Box 2488****2700 East I-20****Odessa TX 79760-2488**Date or dates debt was incurred **Various**

Last 4 digits of account number

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**3.150** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$49.50*Check all that apply.***S.V. Reliable Transport, LLC****2963 S County Road West****Odessa TX 79766**Date or dates debt was incurred **Various**

Last 4 digits of account number

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**3.151** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$1,086.00*Check all that apply.***Salt Water Partners #1 SWD, LLC****P.O. Box 3526****4201 E Hwy 158****Midland TX 79702**Date or dates debt was incurred **Various**

Last 4 digits of account number

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**3.152** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$60.00*Check all that apply.***Saltwater Partners, LLC****P.O. Box 3526****Midland TX 79702**Date or dates debt was incurred **Various**

Last 4 digits of account number

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.153 Nonpriority creditor's name and mailing address Sandpit Water Station P.O. Box 1081 Stanton TX 79782 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$528.00
3.154 Nonpriority creditor's name and mailing address Shady Acre Water Station P.O. Box 722 Rankin TX 79778 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,555.00
3.155 Nonpriority creditor's name and mailing address Southwest Specialties, Inc. P.O. Box 14194 Odessa TX 79768 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,516.68
3.156 Nonpriority creditor's name and mailing address SSF, LLC P.O. Box 649 Andrews TX 79714 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.157 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Stanley & Nelda Helmers****N.J. Water Station****2310 West 2nd St.****Monahans TX 79756**Date or dates debt was incurred **Various**

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

\$32.00**3.158** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Stinger Disposal, LLC****P.O. Box 71****515 West Harris Ave., Ste. 200****San Angelo TX 76902**Date or dates debt was incurred **Various**

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

\$402.00**3.159** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Stringer Disposal, LLC****P.O. Box 71****San Angelo TX 76902**Date or dates debt was incurred **Various**

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

\$28.00**3.160** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**T.O. Midkiff****P.O. Box 66****Midkiff TX 79755**Date or dates debt was incurred **Various**

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

\$240.00

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

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Amount of claim

3.161 Nonpriority creditor's name and mailing address Tall City Brine, LLC 203 W. Wall Street, Ste 700 Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,336.75
3.162 Nonpriority creditor's name and mailing address Tervita, LLC P.O. Box 840730 Dallas TX 75284 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,440.50
3.163 Nonpriority creditor's name and mailing address Tex & Barbara Halfmann, LLC CR 270 Fresh Water Station 775 CR 130 Garden City TX 79739 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.00
3.164 Nonpriority creditor's name and mailing address Texas SWD Co, Inc. P.O. Box 444 Big Lake TX 76932 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,237.95

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.165</div> Nonpriority creditor's name and mailing address The Hose Connection, Inc. P.O. Box 13622 Odessa TX 79768 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$96.45
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.166</div> Nonpriority creditor's name and mailing address The McCreless Company 1318 N. Grant Odessa TX 79761-3897 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,326.46
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.167</div> Nonpriority creditor's name and mailing address Topat Oil Corporation 505 N Big Spring St., Ste. 405 Midland TX 79701 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,177.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.168</div> Nonpriority creditor's name and mailing address Trinity Environmental SWD-Permian Basin 13443 Hwy 71 West Bee Cave TX 78738 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,581.17

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.169</div> Nonpriority creditor's name and mailing address Triple A Water Station, LLC P.O. Box 54 1606 WCR 140 Midland TX 79702 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.170</div> Nonpriority creditor's name and mailing address Uline 980 W. Bethel Road Coppell TX 75019 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,058.35
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.171</div> Nonpriority creditor's name and mailing address Unifirst Holdings, Inc. P.O. Box 1666 Odessa TX 79760 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,126.30
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.172</div> Nonpriority creditor's name and mailing address Union Steel of Texas 4534 W I-20 Odessa TX 79769 Date or dates debt was incurred Various Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$442.06

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.173 Nonpriority creditor's name and mailing address United Rentals 1220 South Grandview Ave Odessa TX 79761-7139 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,479.55
3.174 Nonpriority creditor's name and mailing address US Chaparral Water Systems, Inc. P.O. Box 80249 Midland TX 79708 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$893.00
3.175 Nonpriority creditor's name and mailing address Valley Water P.O. Box 3248 Big Spring TX 79721 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$240.00
3.176 Nonpriority creditor's name and mailing address Wagner Supply Co. P.O. Box 225387 Dallas TX 75222-5387 Date or dates debt was incurred Various Last 4 digits of account number — — — —	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$236.06

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.177 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$12,622.50*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Water Midstream Partners, LLC****P.O. Box 51167****Midland TX 79710**Date or dates debt was incurred **Various**

Last 4 digits of account number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

3.178 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$1,690.00*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**West Texas H2O, Ltd.****P.O. Box 10854****Midland TX 79702**Date or dates debt was incurred **Various**

Last 4 digits of account number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

3.179 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$708.50*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Western Disposal Systems, LP****P.O. Box 3279****Corrales NM 87048-3270**Date or dates debt was incurred **Various**

Last 4 digits of account number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

3.180 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$8,192.00*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Goods and/or Services**Wichita Water, LLC****P.O. Box 848****Levelland TX 79336**Date or dates debt was incurred **Various**

Last 4 digits of account number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.181</div> Nonpriority creditor's name and mailing address <u>Wildcat Water, LLC</u> <u>3000 North Garfield #210</u> <u>Midland TX 79705</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$482.50</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.182</div> Nonpriority creditor's name and mailing address <u>Wilson Water Station</u> <u>P.O. Box 45</u> <u>Stanton TX 79782</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$48.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.183</div> Nonpriority creditor's name and mailing address <u>WTG Fuels, Inc.</u> <u>P.O. Box 3514</u> <u>Midland TX 79702</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$22.15</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.184</div> Nonpriority creditor's name and mailing address <u>XOG Operating, LLC</u> <u>P.O. Box 352</u> <u>Midland TX 79702</u> Date or dates debt was incurred <u>Various</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods and/or Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$670.00</u>

Debtor **Tall City Well Service, LP**Case number (if known) **16-70079****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	IRS P.O. Box 7346 Philadelphia PA 19101-7346	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Taxes	_____ _____ _____ _____

Debtor Tall City Well Service, LPCase number (if known) 16-70079**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$653,764.64

5b. Total claims from Part 2

5b. + \$1,402,088.92

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$2,055,853.56

Fill in this information to identify the case:

Debtor name Tall City Well Service, LP

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number
(if known) 16-70079

Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

Fill in this information to identify the case:Debtor name **Tall City Well Service, LP**United States Bankruptcy Court for the: **WESTERN DISTRICT OF TEXAS**Case number
(if known) **16-70079**☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

Check all schedules that apply:

Name	Mailing address	Name	
2.1 J G Solis	6801 Executive Ct. Number Street	Wells Fargo Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	Midland TX 79707 City State ZIP Code		
2.2 J G Solis	6801 Executive Ct. Number Street	Wells Fargo Equipment Finance, Inc.	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	Midland TX 79707 City State ZIP Code		
2.3 J G Solis, Inc.	800S. Burleson St. Number Street	Wells Fargo Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	McCamey TX 79752 City State ZIP Code		
2.4 J G Solis, Inc.	800 S. Burleson Number Street	Wells Fargo Equipment Finance, Inc.	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	McCamey TX 79752 City State ZIP Code		

Fill in this information to identify the case:

Debtor Name Tall City Well Service, LP

United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS

Case number (if known): 16-70079

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B.....	\$0.00
1b. Total personal property: Copy line 91A from Schedule A/B.....	\$12,446,731.00
1c. Total of all property Copy line 92 from Schedule A/B.....	\$12,446,731.00

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, at the bottom of page 1 of Schedule D..... **\$12,428,779.00**

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$653,764.64
3b. Total amount of claims of non-priority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+ \$1,402,088.92

4. Total liabilities

Lines 2 + 3a + 3b..... **\$14,484,632.56**

Fill in this information to identify the case and this filing:Debtor Name Tall City Well Service, LPUnited States Bankruptcy Court for the: WESTERN DISTRICT OF TEXASCase number
(if known) 16-70079Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/31/2016
MM / DD / YYYY

X /s/ Joel G. Solis
Signature of individual signing on behalf of debtor

Joel G. Solis
Printed name

Partner
Position or relationship to debtor

Fill in this information to identify the case:Debtor name Tall City Well Service, LPUnited States Bankruptcy Court for the: WESTERN DISTRICT OF TEXASCase number
(if known) 16-70079☐ Check if this is an amended filingOfficial Form 207**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply.

Gross revenue
(before deductions
and exclusions)

From the beginning of the
fiscal year to filing date:

From 01/01/2016 to Filing date

☒ Operating a business
☐ Other _____

\$3,552,958.00

For prior year:

From 01/01/2015 to 12/31/2015

☒ Operating a business
☐ Other _____

\$19,859,747.00

For the year before that:

From 01/01/2014 to 12/31/2014

☒ Operating a business
☐ Other _____

\$25,658,990.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	Wells Fargo Bank <small>Creditor's Name</small> MAC C7300-055 <small>Number Street</small> 1740 Broadway Denver CO 80274 <small>City State ZIP Code</small>	Vehicles	May 1, 2016	

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or government audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	Wells Fargo Equipment Finance v Tall City Well Service et al	Sequestration	238 District Court <small>Name</small> Midland, Texas <small>Number Street</small>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Case number CV52308		<small>City State ZIP Code</small>	

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000.**☒ None**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe the property transferred	Dates	Total amount or value
11.1.	Jesse Blanco		5/15/2016	\$15,000.00
	Address			
	7406 Garden Grove			
	Number Street			
	San Antonio, Texas 78250			
	City State ZIP Code			
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****13. Transfers not already listed on this statement**

List any transfers of money or other property--by sale, trade, or any other means--made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- ☐ diagnosing or treating injury, deformity, or disease, or
- ☐ providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained _____

Does the debtor have a privacy policy about that information?

☐ No.☐ Yes.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?☐ No. Go to Part 10.☐ Yes. Fill in below:

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts, certificates of deposit, and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

☒ No☐ Yes. Provide details below.

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079**

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address

Dates of service

26a.1. **Debtor**
 Name _____ From _____ To _____
 Street _____

 City _____ State _____ ZIP Code _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Debtor**
 Name _____
 Street _____

 City _____ State _____ ZIP Code _____

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079**

- 26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **Wells Fargo Bank**

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No.

☐ Yes. Give the details about the two most recent inventories.

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Joel G. Solis	6801 Executive Court Midland, TX 79707	Partner	99%
Tall City Management, LLC			1%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
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30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Debtor **Tall City Well Service, LP**
NameCase number (if known) **16-70079****Part 14: Signature and Declaration**

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **05/31/2016**
MM / DD / YYYY**X /s/ Joel G. Solis**Printed name **Joel G. Solis**

Signature of individual signing on behalf of the debtor

Position or relationship to debtor **Partner**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
MIDLAND DIVISION**

IN RE:
Tall City Well Service, LP

CHAPTER **11**

DEBTOR(S)

CASE NO **16-70079**

LIST OF EQUITY SECURITY HOLDERS

Registered Name of Holder of Security Last Known Address or Place of Business	Class of Security	Number Registered	Kind of Interest Registered
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**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Partner of the Partnership
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: 5/31/2016

Signature: /s/ Joel G. Solis
Joel G. Solis
Partner

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
MIDLAND DIVISION

In re: **Tall City Well Service, LP**CASE NO **16-70079**CHAPTER **11**

BUSINESS INCOME AND EXPENSES

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income for 12 Months Prior to Filing:	\$10,000,000.00
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PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income:	\$662,000.00
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PART C - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor):	\$164,000.00
4. Payroll Taxes:	\$24,000.00
5. Unemployment Taxes:	\$14,000.00
6. Worker's Compensation:	\$5,000.00
7. Other Taxes:	\$0.00
8. Inventory Purchases (including raw materials):	\$0.00
9. Purchase of Feed/Fertilizer/Seed/Spray:	\$0.00
10. Rent (other than debtor's principal residence):	\$0.00
11. Utilities:	\$5,000.00
12. Office Expenses and Supplies:	\$9,000.00
13. Repairs and Maintenance:	\$32,000.00
14. Vehicle Expenses:	\$22,000.00
15. Travel and Entertainment:	\$12,000.00
16. Equipment Rental and Leases:	\$0.00
17. Legal/Accounting/Other Professional Fees:	\$3,000.00
18. Insurance:	\$34,000.00
19. Employee Benefits (e.g., pension, medical, etc.):	\$0.00
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify):	
Security Agreement	\$495,000.00
21. Other (Specify):	None
22. Total Monthly Expenses (Add items 3 - 21)	\$819,000.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2):	(\$157,000.00)
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